| Ui | ill in this impormation to idenited States Bankruptcy Court for to | he: | 02/17/16 Enter ument Page 1 | d 02/17/16 of 55 | 14:25:28 | Desc Ma | ain |
|------------------------|---|--|---|---------------------|-------------------|---------------------|---------------|
| C | ase number (if known): | Chapter | ou are filing under: | | | | |
| | | Cha | pter 7 pter 11 pter 12 pter 13 | | Check if | this is an | • |
| ~ | 5 - 1 - 1 404 | | | _ | | | |
| <u>O</u> t | ficial Form 101 | | | | | | |
| Vo | luntary Petition for In | dividuals Filing f | or Bankruptcy | | | | 12/15 |
| mu Be cor you | st report information as Debtor 1 as complete and accurate as posterect information. If more space in name and case number (if known art 1: | and the other as Debtor ssible. If two married per is needed, attach a separ | The same person mapple are filing together, ate sheet to this form. | ust be Debtor 1 i | n all of the form | ns. or supplying | |
| Г | alt I. Identify Foursen | | | | | | |
| 1. | Your full name | About Debtor 1: | | About Debto | or 2 (Spouse O | nly in a Joint | Case): |
| 1. | Write the name that is on your | | | | | | |
| | government-issued picture | Vitangelo First Name | · | First Name | | | |
| | identification (for example, your driver's license or | | | | | | |
| | passport). | Middle Name | | Middle Name | | | |
| | Bring your picture | L'Abbate Last Name | | Last Name | | <u>.</u> | : |
| | identification to your meeting | Lastivanie | | Last Name | | | |
| | with the trustee. | Suffix (Sr., Jr., II, III) | | Suffix (Sr., Jr., | II, III) | | : |
| | | | · · · · · · · · · · · · · · · · · · · | | | | |
| 2. | All other names you have used in the last 8 years | First Name | The complete of | First Name | | | |
| | Include your married or | Middle Name | | Middle Name | | | |
| | maiden names. | Last Name | St a | Last Name | | | <u> </u> |
| 3. | Only the last 4 digits of | | | | | | |
| | your Social Security | xxx - xx - <u>0</u> | 8 6 7 | xxx – xx | | . — — — | |
| | number or federal Individual Taxpayer | OR | | OR | | | |
| | Identification number | 9xx - xx | | 9xx - xx | - | | · |
| | (ITIN) | | • | | | | ٠. |
| 4. | Any business names and Employer Identification Numbers | ✓ I have not used any | business names or EIN | s. 🔲 I have n | ot used any bus | siness names | or EINs. |
| | (EIN) you have used in the last 8 years | Business name | | Business name | • | | |
| | Include trade names and | Business name | | Business name |) | | |

doing business as names

Business name

Business name

| First Name 16-05 | | ed 02/17/16 14:25:28 Desc Main Of Sout Debtor 2 (Spouse Only in a Joint Case): |
|---|--|---|
| | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | | If Debtor 2 lives at a different address: |
| and the set of the set of | 7917 Wellington Ave. Number Street | Number Street |
| | | · · · · · · · · · · · · · · · · · · · |
| | Elmwood Park IL 60707 City State ZIP Code | City State ZIP Code |
| | County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |
| | Number Street | Number Street |
| | P.O. Box City State ZIP Code | P.O. Box City State ZIP Code |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| Part 2: Tell the Cou | rt About Your Bankruptcy Case | |
| 7. The chapter of the Bankruptcy Code you | Check one: (For a brief description of each, see No for Bankruptcy (Form 2010)). Also, go to the top of | otice Required by 11 U.S.C. § 342(b) for Individuals Filing f page 1 and check the appropriate box. |
| are choosing to file under | Chapter 7 | |
| | Chapter 11 | |
| | Chapter 12 | |
| | Chapter 13 | |
| | | |

| 8. | Case 16-05074 | | | | | 7/16 14:25 | | |
|-----|---|-------------------------|---|--|----------------------------------|---|---|---------------------------|
| 0. | now you will pay the fee | court | pay the project fast when for more details about how with cash, cashier's check, If, your attorney may pay w | v you may pay. Tor money order. | Typically If your | /, if you are pay attomey is subr | ing the fee yourse nitting your payme | elf, you may |
| | | ☐ I nee | d to pay the fee in install iduals to Pay Your Filing F | ments. If you ch | noose th | is option, sign a | | olication for |
| | | By la than fee in | uest that my fee be waive w, a judge may, but is not 150% of the official povert n installments). If you choo g Fee Waived (Official Form | required to, waive y line that applies ose this option, ye | e your fe s to you ou must | ee, and may do r family size and fill out the App | so only if your inc d you are unable t | ome is less to pay the |
| 9. | Have you filed for | □ No | | | | | | |
| | bankruptcy within the last 8 years? | ✓ Yes. | | | | | | |
| | | District N | DIL | | When | MM / DD / YYYY | Case number _ | |
| | | District _ | | | When I | MM / DD / YYYY | Case number _ | |
| | *** | District _ | | | When | MM / DD / YYYY | Case number _ | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with | ✓ No ☐ Yes. | | 1 1 v | | | | |
| | you, or by a business | Debtor _ | <u> </u> | | | Relationsh | , | <u></u> |
| | partner, or by an affiliate? | District _ | | | When | MM / DD / YYYY | Case number, _ if known | <u> </u> |
| | | Debtor _ | | | | Relationsh | ip to you | |
| | | District _ | | A service of the serv | When | MM / DD / YYYY | Case number, _ if known | |
| 11. | Do you rent your residence? | ✓ No. ☐ Yes. | Go to line 12. Has your landlord obtain residence? | ed an eviction jud | dgment | against you and | d do you want to s | tay in your |
| | | | No. Go to line 12. Yes. Fill out Initial S and file it with this b | | | tion Judgment | Against You (Forn | n 101A) |

| Pá | rt 3: Report About Ar | ıy Bı | ısine | sses You own as a sole Page 14 of 55 | | | |
|----|---|-------------------------|---------------------------|--|---------------------------------------|------------------------------|---------------------------------------|
| 2. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of business | | | |
| | A sole proprietorship is a business you operate as an | | | Name of business, if any | | | |
| | individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Number Street | | | · · · · · · · · · · · · · · · · · · · |
| | If you have more than one sole proprietorship, use a | | | City | State | ZIP Co | de |
| | separate sheet and attach it to this petition. | | | Check the appropriate box to describe your busine | ess; | | |
| | | | | Health Care Business (as defined in 11 U.S.C. Single Asset Real Estate (as defined in 11 U.S.C. § 101(5 Commodity Broker (as defined in 11 U.S.C. § None of the above | S.C. § 101(51 3A)) | | |
| | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> | cari mos | <i>set ap</i> st recei | filing under Chapter 11, the court must know whether or operate deadlines. If you indicate that you are a set balance sheet, statement of operations, cash-flow these documents do not exist, follow the procedure | mall business v statement, a | debtor, you nd federal in | must attach your come tax return |
| | debtor? | \checkmark | No. | I am not filing under Chapter 11. | | | |
| | For a definition of small business debtor, see | | No. | I am filing under Chapter 11, but I am NOT a small the Bankruptcy Code. | l business del | otor accordin | g to the definition |
| | 11 U.S.C. § 101(51D). | | Yes. | I am filing under Chapter 11 and I am a small busi Bankruptcy Code. | ness debtor a | ccording to t | he definition in the |
| P | rt 4: Report if You Ov | vn o | r Hav | e Any Hazardous Property or Any Prope | erty That N | eeds Imm | ediate Attenti |
| | Do you own or have any | $\overline{\mathbf{V}}$ | No | | | | |
| | property that poses or is alleged to pose a threat of | | Yes. | What is the hazard? | | | |
| | imminent and identifiable hazard to public health or | | | List system | | | |
| | safety? Or do you own any property that needs immediate attention? | | | If immediate attention is needed, why is it needed? | 2 | | |
| | For example, do you own | | | | ٠. | | |
| | perishable goods, or livestock that must be fed, or | | | Where is the property? | | *** | |
| | a building that needs urgent repairs? | | | Number Street | · · · · · · · · · · · · · · · · · · · | <u> </u> | |
| | | | | and the second second | | | |
| | | | | City | | State | ZIP Code |
| | | | | | | | |
| | | | | | | | |

First Name Case 16-05074 Doc 1 Filed 02/17/16 Entered 02/17/16 14:25:28 Desc Main Explain Your Efforts to Receive a BAGHING About Craffe Gouns In

 Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a bnefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| P | Fire Arswer These (| | | | | | | 14:25:2 | 28 Desc l | |
|-----|---|---|-----------------------------------|---|---------------------------------|---|----------------------|------------------|--|----------------------|
| 16. | What kind of debts do you have? | | Are y | your debts prin | marily co ndividual r 16b | nsumer debts? Co | nsumer debt | | | § 101(8) |
| | | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | | | | | |
| | | 16c. | State | the type of del | ots you ov | ve that are not consu | ımer or busin | ess debts | i. | |
| 17. | Are you filing under Chapter 7? | | No. | I am not filing u | ınder Cha | pter 7. Go to line 18 | 3. | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | | • | | 7. Do you estimate are paid that funds | | | | |
| 18. | How many creditors do you estimate that you owe? | | 1-49 50-99 100-19 200-99 | | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 50,00 | 01-50,000 01-100,000 than 100,000 | er er e |
| 19. | How much do you estimate your assets to be worth? | | \$100,0 | 0,000 01-\$100,000 001-\$500,000 001-\$1 million | | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million) million | \$1,00 \$10,0 | ,000,001-\$1 billi 00,000,001-\$10 I 000,000,001-\$50 than \$50 billion | billion) billion |
| 20. | How much do you estimate your liabilities to be? | $\overline{\mathbf{V}}$ | \$100,0 | 0,000 01-\$100,000 001-\$500,000 001-\$1 million | | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million) million | \$1,00 \$10,0 | ,000,001-\$1 billi 00,000,001-\$10 l 000,000,001-\$50 than \$50 billion | billion billion |
| Р | art 7: Sign Below | | | | | <u> </u> | | | | |
| For | you | | ve exan | | on, and I o | declare under penalt | y of perjury tl | nat the inf | ormation provide | ed is true |
| | | or 13 | 3 of title | | | r 7, I am aware that I understand the re | | | | |
| | | | | | | d not pay or agree to and read the notice re | | | | elp me fill |
| | | l req | uest re | lief in accordan | ce with th | e chapter of title 11, | United State | s Code, s | pecified in this p | etition. |
| | | conn | nection | | cy case c | ent, concealing prope an result in fines up 19, and 3571. | | | | |
| | | $\left(\mathbf{x}\right)$ |) (/ ignatur | tangul 6 re of Debtor 1 | | abote | XSignature | e of Debto | or 2 | |
| | | E | Execute | ed on MM / DD / | YYYY | | Executed | | DD / YYYY | |

Fiether 16-05074 Dec 1 File 002/17/16 Entered 02/17/16 14:25:28 Desc Main

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the the three in the getitor of the fare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 15/ Joseph C. Mic | helotti Da | | _ |
|----------------------------------|----------------|----------------|---|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| | ν' | | |
| Joseph C. Michelotti | | | |
| Printed name | | | |
| Michelotti & Associates | | | |
| Firm Name | | | |
| 2625 Butterfield Rd. | · | | |
| Number Street | | | |
| Suite 138S | | | |
| | | | |
| | | | |
| | | | |
| Oak Brook | <u>IL</u> | 60523 | |
| City | State | ZIP Code | |
| | | | |
| Contrat about (600) 000 0400 | Farall address | | |
| Contact phone (630) 928-0100 | Email address | · | |
| 240,770 | | | |
| 6185760 | <u> L</u> | | |
| Bar number | State | | |

| Fill in this inf | ormation to | dentify yo | our case and | this filing: Ent | ered 02/17/1 e 8-of 55 | 6 14:25:28 | Desc Main | , |
|---|--|----------------------------------|---|--|--|--|--|----------|
| Debtor 1 | Vitangelo First Name | Middle | | :Abbate ast Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle | Name L | ast Name | | | | |
| United States Bar | nkruptcy Court | for the: NOR | THERN DISTRI | CT OF ILLINOIS | | | | |
| Case number (if known) | | | | | | . — | if this is an led filing | |
| Official F <u>or</u> m | 106A/B | | | | | | | |
| Schedule A | | rtv | | | | | 12/ | 15 |
| filing together, bo sheet to this form Part 1: De | th are equally On the top of Scribe Each or have any le | responsible f of any addition | or supplying co al pages, write e, Building, La | omplete and accurrect information. I your name and cas and, or Other Roy residence, building | if more space is no e number (if know eal Estate You | eeded, attach a vn). Answer eve Own or Have | separate ry question. | |
| | nere is the prop | - | What is the pro | • • | | | ms or exemptions. Put | the |
| 7917 Wellington Street address, if avail | Ave. able, or other des | scription | Check all that ar Single-famil | 7. 7. 1 | | - | ims on Schedule D: s Secured by Property. | |
| · · · · · · · · · · · · · · · · · · · | - | | Duplex or m | ulti-unit building m or cooperative | Current v entire pro | alue of the operty? | Current value of the portion you own? | |
| Elmwood Park City Cook | IL State | ZIP Code | ☐ Manufacture ☐ Land ☐ Investment ☐ Timeshare ☐ Other | ed or mobile home | interest (| \$210,000.00 the nature of yo such as fee simple, or a life estate | ple, tenancy by the | <u>D</u> |
| County | | | <u> </u> | erest in the propert | y? Primary | Residence | · · · · · · · · · · · · · · · · · · · | |
| Primary Resdiel | | | | • | (see i | k if this is comn | nunity property | |
| | | | | on you wish to add | l about this item, s | such as local | | |
| entries for pa | | attached for l | - | ır entries from Part at number here | | → | \$210,000.0 | 0 |
| Do you own, lease | | | | vehicles, whether t | | | | |
| 3. Cars, vans, t | rucks, tractor | s, sport utility | vehicles, motor | cycles | | | | |
| □ No ☑ Yes | | | | | | • | | |
| | | | | | | | | |

| Debi | | elo 16-050 M4dle Na)@C | Cas C1 Fule dia 02/17/16 Entered | se number (if known) 02/17/16 14:25:28 | Desc Main |
|------|----------------------------|-------------------------------------|--|---|---------------------------------------|
| | LINGTON | E TO-OOO MANDIE MENIOC | | | |
| 3.1. | | | Who has an interest in the property? | | |
| Mak | e: | Toyota | Check one. | amount of any secured clair Creditors Who Have Claims | |
| Mod | el: | Sienna | Debtor 1 only | | • • • |
| Year | r: | 2006 | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| IggA | roximate mileage: | 150,000 | Debtor 1 and Debtor 2 only | | |
| | er information: | | At least one of the debtors and another | \$3,000.00 | \$3,000.00 |
| Othe | or unormation. | | Check if this is community property | | |
| Paid | d in Full / Poor | Condition | (see instructions) | | |
| 4. | Watercraft, aircr | aft, motor homes, ATVs | and other recreational vehicles, other vehil watercraft, fishing vessels, snowmobiles, n | | |
| | ✓ No ☐ Yes | | | • | |
| 5. | | | own for all of your entries from Part 2, incl Part 2. Write that number here | - | \$3,000.00 |
| | entities for page | s you have attached for | rait 2. Wille that number nere | | |
| Pa | art 3: Desci | ribe Your Personal a | and Household Items | | |
| Do y | you own or have | any legal or equitable in | terest in any of the following items? | | Current value of the portion you own? |
| | | | | | Do not deduct secured |
| | | | | | claims or exemptions. |
| 6. | Household good | ds and furnishings | | | |
| 7.7 | . • | appliances, furniture, line | ens, china, kitchenware | | |
| | ☐ No | | | | |
| | Yes. Describ | e Sofa, Beds, Bed | ding, Table & Chairs, Kitchen | | \$550.00 |
| | | Items, all in used | d condition | | |
| 7. | | | video, stereo, and digital equipment; comput evices including cell phones, cameras, media | | Y |
| | N. | o conconorio, ciconornio de | whoes modeling our phones, cameras, media | piayers, garnes | |
| | No | , | | | |
| | Yes. Describ | Je | | | |
| 8. | | ues and figurines; painting | gs, prints, or other artwork; books, pictures, c ollections; other collections, memorabilia, co | - | |
| | № No | | | | |
| | Yes. Describ | oe | | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| 9. | Equipment for s | ports and hobbies | | | |
| J. : | Examples: Sport | s, photographic, exercise | , and other hobby equipment; bicycles, pool tools; musical instruments | tables, golf clubs, skis; | |
| | No No | | | | |
| | Yes. Describ | be | | | |
| 10. | Firearms Examples Pisto | ls rifles shotguns ammu | nition, and related equipment | | |
| | No No | io, mioo, onorgano, amina | miori, and rolated equipment | | |
| | Yes. Describ | be | | | |
| | | | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 11. | Clothes Examples: Every | yday clothes, furs, leather | coats, designer wear, shoes, accessories | | |
| | □ No | | | | |
| | Yes. Describ | De Casual Clothing | | | \$250.00 |
| 12. | | yday jewelry, costume jew silver | elry, engagement rings, wedding rings, heirlo | oom jewelry, watches, gems, | |
| | ₩ No | | | | |
| | Yes. Describ | be | | | |

| | tor 1 | Vitangelo Fils: ASE 16-05 rm animals | O Maddle Na No C 1 | Filedia 2/17/16 Document | Entered 02/17/16 1 Page 10 of 55 | 4:25:28 | Desc Main |
|-----|------------------|--|---|---|--|------------|---|
| 13. | | les: Dogs, cats, bird | s, horses | | | | |
| | _ | s. Describe | | | | - | · · · · · · · · · · · · · · · · · · · |
| 14. | did not | list | ousehold items you o | lid not already list, in | cluding any health aids you | | |
| | | s. Give specific | | | | _ | |
| 15. | | | - | | entries for pages you have | | \$800.00 |
| Р | art 4: | Describe You | r Financial Asset | s | | | |
| | | n or have any legal (| or equitable interest | in any of the followin | g? | p | Current value of the cortion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examp | les: Money you have petition | e in your wallet, in you | r home, in a safe depo | sit box, and on hand when you | file your | |
| | ✓ No | | | | Cash: | | |
| 17. | | its of money | *************************************** | *************************************** | Jasii IIII | _ | |
| | - | les: Checking, savin | es, and other similar i | | of deposit; shares in credit union e multiple accounts with the sam | | |
| | □ No ☑ Ye | s | Institution i | name: | | | |
| | | 7.1. Checking acco | | | | | \$800.00 |
| 18. | | les: Bond funds, inv | eublicly traded stocks estment accounts with | s n brokerage firms, mon | ey market accounts | | |
| | | s | Institution or issuer n | ame: | | | |
| | - | | | | | | |
| | _ | | | | | · | |
| 19. | | | and interests in inco | | rporated businesses, including | ıg . | |
| | | s. Give specific formation about | | | | | e e e e e e e e e e e e e e e e e e e |
| | | em | Name of entity: | | | ownership: | |
| 20. | Negoti Non-ne | able instruments incl egotiable instruments | ude personal checks, | egotiable and non-ne cashiers' checks, pror transfer to someone b | nissory notes, and money order by signing or delivering them. | S | |
| | inf | es. Give specific formation about | Issuer name: | | | | |
| | | ···· | | , | | | e e e e e e e e e e e e e e e e e e e |
| | | | | | | | |
| | | 4 | | | | | |

| Deb |) Heer takes | Case number (if known) ered 02/17/16 14:25:28 | Desc Main |
|-----|--|--|-----------|
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings account | 11 of 55 | |
| | profit-sharing plans | 5, 61, 64, 64, 64, 64, 64, 64, 64, 64, 64, 64 | |
| | ☑ No | • | |
| | Yes. List each account separately. Type of account: Institution name: | | |
| 22 | 2. Security deposits and prepayments | | |
| 22. | Your share of all unused deposits you have made so that you may continue servi Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, companies, or others | | |
| | ⊘ No | | |
| | Yes Institution name or individual: | | |
| 23. | Annuities (A contract for a specific periodic payment of money to you, either for No | life or for a number of years) | |
| | Yeslssuer name and description: | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | under a qualified state tuition pro | gram. |
| | ☑ No | | |
| | Yes Institution name and description. Separately file the | records of any interests. 11 U.S.C. | § 521(c) |
| | | | |
| | | | |
| | | | |
| 25. | 5. Trusts, equitable or future interests in property (other than anything listed in | line 1), and rights or | |
| | powers exercisable for your benefit | ent of the said | |
| | ✓ No ☐ Yes. Give specific | | |
| | information about them | | |
| 26. | 6. Patents, copyrights, trademarks, trade secrets, and other intellectual proper | | |
| | Examples: Internet domain names, websites, proceeds from royalties and licensi | ng agreements | |
| | ✓ No ☐ Yes. Give specific | , | |
| | information about them | | |
| 27. | 7. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings | , liquor licenses, professional licens | es |
| | ☑ No | | |
| ٠. | Yes. Give specific information about them | · · · · · · · · · · · · · · · · · · · | |
| | Information about thom. | | |

| btor 1 | | 4 File A OO 14 7 14 C | Case number | 7/4 C 4 4.OE.OO | Dana Main |
|--|---|---|---|--------------------------|---|
| | Fire Page 16-050 Middle Name | c 1 Filed 02/17/16 Document | Entered 02/17 Page 12 of 55 | //16 14:25:28 | Desc Main |
| oney or | property owed to you? | Document | rage 12 01 33 | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Тах | refunds owed to you | | | ** | |
| | No | | | | |
| | Yes. Give specific information | | | Federal | \$0.00 |
| | about them, including whether you already filed the returns | 4 | | State: | \$0.00 |
| á | and the tax years | | | Local: | \$0.00 |
| | ily support inples: Past due or lump sum alimony | , spousal support, child suppo | ort, maintenance, divorc | e settlement, property | y settlement |
| 1 | No Yes. Give specific information | | | Alimony: | \$0.00 |
| Ц | · | | | Maintenance: | \$0.00 |
| | | | | Support: | \$0.00 |
| | | | | Divorce settlement | \$0.00 |
| | $\frac{1}{2} (\partial x) = A - \frac{1}{2} (\partial x) = \frac{1}{2} $ | | | Property settlemen | t: \$0.0 |
| | No | benefits; unpaid loans you m | ade to someone cise | | |
| Inter | | | | er's, or renter's insura | nce |
| Inter Exar | No Yes. Give specific information rests in insurance policies | nce; health savings account (| | | nce urrender or refund value |
| Inter | No Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy | nce; health savings account (| HSA); credit, homeowne | | |
| Inter Exar | No Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy | nce; health savings account (| HSA); credit, homeowne | | |
| Inter Exar | No Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | nce; health savings account (y name: from someone who has die | HSA); credit, homeowne Beneficiary: | Su | |
| Inter Exal | No Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | nce; health savings account (y name: from someone who has die expect proceeds from a life in | HSA); credit, homeowne Beneficiary: | Su | |
| Inter Exar | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | nce; health savings account (y name: from someone who has die expect proceeds from a life in | HSA); credit, homeowne Beneficiary: | Su | |
| Inter Exar | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | rice; health savings account (y name: from someone who has die expect proceeds from a life insone has died | HSA); credit, homeowned Beneficiary: desurance policy, or are cu | Surrently | |
| Inter Exar Any If you entit! | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | roe; health savings account (y name: from someone who has die expect proceeds from a life intone has died | HSA); credit, homeowned Beneficiary: d surance policy, or are cut | Surrently | |
| Any If you entit! | Yes. Give specific information rests in insurance policies reples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | roe; health savings account (y name: from someone who has die expect proceeds from a life intone has died | HSA); credit, homeowned Beneficiary: d surance policy, or are cut | Surrently | |
| Any If you entitt Claim Exar | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | root you have filed a lawsuies, insurance claims, or rights | Beneficiary: d surance policy, or are cu | urrently | |
| Any If you entite Claim Exar Other | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | root you have filed a lawsuies, insurance claims, or rights | Beneficiary: d surance policy, or are cu | urrently | |
| Any If you entite Clain Exar Other right | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | from someone who has die expect proceeds from a life insone has died not you have filed a lawsuites, insurance claims, or rights | Beneficiary: d surance policy, or are cu | urrently | |
| Any If you entit! Claim Exar Claim Any Any Any | No Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | from someone who has die expect proceeds from a life insone has died not you have filed a lawsuites, insurance claims, or rights | Beneficiary: d surance policy, or are cu | urrently | |
| Any If you entit! Claim Exar Other right Any | Yes. Give specific information rests in insurance policies mples: Health, disability, or life insura No Yes. Name the insurance Compan company of each policy and list its value | from someone who has die expect proceeds from a life insone has died not you have filed a lawsuites, insurance claims, or rights | Beneficiary: d surance policy, or are cu | urrently | |

Debtor 1

| Deb | | | 0-0507/Addle NaMQC 1 | L'Abbate Filedi@2/17 | 7/16 Enter | Case numbe ed 02/17/ | r (if known) /16 14:25:28 | Desc Main |
|-----|---------------|----------------------------------|--|-------------------------|---------------------|-------------------------|------------------------------|---|
| Pa | art 5: | Describe Ar | ny Business-Relate | d Property Yo | u Own or Hav | e an Intere | est In. List any | real estate in Part 1. |
| 37. | Do you | own or have a | any legal or equitable in | terest in any bus | iness-related pro | operty? | | |
| | - | Go to Part 6. . Go to line 38 | 3. | | | | | |
| | | | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accoun | ts receivable | or commissions you alr | eady earned | | | | or oxompasion, |
| | ✓ No ☐ Yes | . Describe | | | | | | |
| 39. | | es: Business-r | rnishings, and supplies related computers, softwa airs, electronic devices | ire, modems, print | ers, copiers, fax n | nachines, rug | s, telephones, | |
| | ✓ No ☐ Yes | . Describe | | | | | | |
| 40. | Machine | ery, fixtures, e | equipment, supplies you | u use in business | , and tools of yo | ur trade | | |
| | ✓ No ☐ Yes | . Describe | | | | | | · · · · · · · · · · · · · · · · · · · |
| 41. | Invento | ry | . 1 | | | | | |
| | Mo ☐ Yes | . Describe | | | | | | |
| 42. | Interest | s in partnersh | nips or joint ventures | | | | | |
| | ☑ No ☐ Yes | . Describe | Name of entity: | | | | % of ownership: | |
| | | | | | | | | |
| | , | | | | | . | | |
| 43. | ₩ No | Do your list | ng lists, or other compil s include personally ide | | tion (as defined i | in 11 U.S.C. § | 101(41A))? | |
| | | Yes. De | | | | | | |
| 44. | | siness-related | property you did not al | ready list | | | , | |
| | | . Give specific | | | | | | |
| | | | | | · <u>·</u> | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | . : | |
| 45. | | | of all of your entries from | | | | | \$0.00 |

| | Document Page 14 of 55 | Desc Main |
|-----|---|---|
| Pa | art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1. | n Interest In. |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | No. Go to Part 7. Yes. Go to line 47. | |
| | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm animals Examples: Livestock, poultry, farm-raised fish | |
| | ✓ No ☐ Yes | |
| 48. | Cropseither growing or harvested | |
| | ✓ No Yes. Give specific information | |
| 49. | Farm and fishing equipment, implements, machinery, fixtures, and tools of trade | |
| | ✓ No ☐ Yes | · · · · · · · · · · · · · · · · · · · |
| 50. | Farm and fishing supplies, chemicals, and feed | |
| | ✓ No ☐ Yes | |
| 51. | Any farm- and commercial fishing-related property you did not already list | |
| | ✓ No Yes. Give specific information | |
| 52. | Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here | \$0.00 |
| Pa | art 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | |
| | ✓ No ☐ Yes. Give specific | |
| | information | |
| | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| | | |

Vitangelo

Debtor 1

| Debtor 1 | Fich Se 16-0507 Middle Rape 1 Files 192/17 Documen | | T771611412 5:28 5 | Desc Main |
|----------|--|------------|---------------------------------|--------------|
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part | 1: Total real estate, line 2 | | → | \$210,000.00 |
| 56. Part | 2: Total vehicles, line 5 | \$3,000.00 | | |
| 57. Part | 3: Total personal and household items, line 15 | \$800.00 | | |
| 58. Part | 4: Total financial assets, line 36 | \$800.00 | | |
| 59. Part | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part | 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part | 7: Total other property not listed, line 54 | +\$0.00 | | |
| 62. Tota | I personal property. Add lines 56 through 61 | \$4,600.00 | Copy personal property total | \$4,600.00 |
| 63. Tota | I of all property on Schedule A/B. Add line 55 + line 62 | | | \$214,600.00 |

| Fill in this inf | ormation to ident | ify your cas | iled 02/17/16 | Entere | -1 | .6 14:25:28 | Desc Mai | n |
|---|--|---|--|--|--|--|---|-----------------|
| Debtor 1 | Vitangelo | | L'Abbate | | 01 55 | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN | DISTRICT OF I | <u>LLINOIS</u> | | | f this is an | |
| Case number (if known) | | | | - | | amende | ed filing | |
| | | | | | _ | | | |
| Official Form | 106C | | | | | | | |
| Schedule C: | The Property | You Clair | m as Exemp | ot | | | | 12/15 |
| Using the property space is needed, fi | d accurate as possible you listed on <i>Schedul</i> Il out and attach to this d case number (if kno | e A/B: Property s page as many | (Official Form 106 | SA/B) as your se | ource, list the | property that you | claim as exempt | . If more |
| is to state a speci exempted up to the receive certain be exemption of 100 | property you claim as fic dollar amount as ne amount of any app enefits, and tax-exem of fair market value nined to exceed that | exempt. Alterr licable statuto pt retirement for under a law t | natively, you may ry limit. Some ex undsmay be unl hat limits the exe | claim the full temptionssuc imited in dolla mption to a pa | fair market va ch as those fo r amount. Ho rticular dolla | alue of the proper or health aids, rig owever, if you cla or amount and the | ty being hts to im an value of the | |
| Part 1: Ide | ntify the Propert | y You Claim | as Exempt | | | · . | | |
| 1. Which set of | exemptions are you | claiming? | Check one only, | even if your spo | ouse is filing w | vith you. | | |
| | claiming state and fed claiming federal exem | | - | 11 U.S.C. § 522 | 2(b)(3) | | | |
| 2. For any prop | erty you list on <i>Sch</i> e | dule A/B that y | you claim as exen | npt, fill in the i | nformation b | elow. | | |
| • | of the property and li t lists this property | | urrent value of e portion you vn | Amount of the exemption you | _ | Specific laws the | at allow exemp | tion |
| | | | opy the value from chedule A/B | Check only or each exemption | , | | | |
| Brief description Primary Resdie | nce | _ | \$210,000.00 | | 0.00 fair market | 735 ILCS 5/12- | 901 & 902 | er er er Græ |
| Line from Schedule | | | | value, up | to any | | | |
| Line from concast | 111 | | | applicabl limit | le statutory | | | |
| Brief description | | | \$3,000.00 | \$2,4 | 100.00 | 735 ILCS 5/12- | 1001(c) | |
| Paid in Full / Po | or Condition | | | 100% of value, up | fair market to any | | | |
| Line from Schedule | e A/B: | | | applicabl limit | le statutory | | | |
| | | | | | | | | |
| | | | | | | | | |
| - | ning a homestead ex ljustment on 4/01/16 a | | | | ifter the date of | of adjustment.) | | |
| | I you acquire the propo | erty covered by | the exemption with | hin 1,215 days | before you file | ed this case? | | . * |

| Debtor 1 Vica | € 16-05074 | Doc 1 | Filterol 1032/17/16 Enterceds 0 22/16/16/16/16/16/16/16/16/16/16/16/16/16/ | | | | | | |
|--|-------------------|-------|--|-----------------------------------|--|------------------------------------|---|--|--|
| First Nar | ne Middle | Name | Document | , F | Page 17 of 55 | | | | |
| Part 2: Add | itional Page | | | | · | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | | | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | | | |
| | | | Copy the value from Schedule A/B | | ck only one box for h exemption | | | | |
| • | | | | | \$600.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| Brief description Sofa, Beds, Bedd Kitchen Items, all in used Line from Schedule | condition | irs, | \$550.00 | | \$550.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | , | | |
| Brief description Chase Bank | | | \$800.00 | | \$800.00 100% of fair market | 735 ILCS 5/12-1001(b) | | | |
| Line from Schedule | A/B: <u>17.1</u> | | | _ | value, up to any applicable statutory limit | | | | |

| Fill in this inf | Ormation to identify | Your case d 02/17/16 TE Document Pag L'Abbate | ttered 02/17/16 ge 18 of 55 | 5 14:25:28 D | esc Main |
|--|--|---|--|---|-----------------------------------|
| Debtor 2 (Spouse, if filing) | | ddle Name Last Name | · · · · · · · · · · · · · · · · · · · | | u.* |
| | | ORTHERN DISTRICT OF ILLINOI | s | | |
| Case number | | | | ☐ Check if this | s is an |
| (if known) | · | · . | | amended fil | |
| Official Form | 106D | | | | |
| | | Have Claims Secured by | y Property | ; | 12/15 |
| Be as complete as correct information On the top of any | nd accurate as possible n. If more space is nee | . If two married people are filing tog ded, copy the Additional Page, fill it your name and case number (if kno | ether, both are equal out, number the entri | | |
| | ck this box and submit the in all of the information be | is form to the court with your other sch elow. | edules. You have noth | ning else to report on | this form. |
| Part 1: Lis | t All Secured Claim | <u> </u> | | | |
| claim, list the creditor has a | creditor separately for ea particular claim, list the c ible, list the claims in alp | has more than one secured ch claim. If more than one other creditors in Part 2. As habetical order according to the | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | | Describe the property that secures the claim: | \$362,000.00 | \$210,000.0 | \$152,000.00 |
| Wells Fargo Hor Creditor's name POB 10335 Number Street | ne Mortgage | 7917 Wellington Ave., Elmwood Park, IL 60707 | | | |
| Des Moines City Who owes the det | IA 50306 State ZIP Code ot? Check one. | As of the date you file, the claim is Contingent Unliquidated Disputed | : Check all that apply. | en e | |
| Debtor 1 only Debtor 2 only Debtor 1 and D At least one of | ebtor 2 only the debtors and another | Nature of lien. Check all that apply. ✓ An agreement you made (such a ─ Statutory lien (such as tax lien, m | s mortgage or secured | car loan) | |
| Check if this c | | Judgment lien from a lawsuit Other (including a right to offset) | Mortgage | · . | |
| Date debt was inc | urred | Last 4 digits of account number | · · | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Add the dollar value that number here: | ue of your entries in Col | umn A on this page. Write | \$362,000.00 | | |
| If this is the last pa | age of your form, add th | e dollar value totals from | | | |

Official Form 106D

all pages. Write that number here:

Schedule D: Creditors Who Have Claims Secured by Property

\$362,000.00

| Fill i | n this inf | ormation to iden | tify your case: | 02/17/16 cument P | Entered 02 age 19 of ! | | L4:25:28 | Desc Mair | 1 |
|--|--|-------------------------|---------------------------------------|------------------------|---------------------------|---------------------------|----------|-----------|--------|
| Debto | or 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | | 50 | | | |
| Debto (Spou | or 2 use, if filing) | First Name | Middle Name | Last Name | | | | | |
| Unite | d States Ba | nkruptcy Court for the | : NORTHERN DIST | TRICT OF ILLING | ois | | | | |
| Case (if kno | number own) | | · · · · · · · · · · · · · · · · · · · | | | | Check if | | |
| <u>Offic</u> | ial Form | 106E/F | | | | | | | |
| Sche | edule E/ | F: Creditors V | Vho Have Uns | ecured Clai | ims | | | | 12/15 |
| claims on Sch Do not If more to this | e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY laims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts in Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), o not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property, more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page of this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims | | | | | | | | |
| 1. D | o any credit | tors have priority un | secured claims agai | nst you? | | | | | |
| | No. Go t | o Part 2. | | | | | | | |
| cla sh m | List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. | | | | | | | | |
| (F | or an explar | nation of each type of | claim, see the instruc | tions for this form i | 40000000 | n booklet. Fotal claim | Priority | Nonpr | iority |

| Debtor 1 | First Name | Middle Name | Döcurnent | Page 20 of 55 | %16 <124/25:28_ | Desc Mai | .n |
|----------|--------------------|---------------------|-----------------------|---------------|-----------------|----------|----|
| Part 2: | List All of Yo | our NONPRIORI | TY Unsecured Cla | ims | | | |
| 3. Do an | v creditors have n | onpriority unsecure | ed claims against you | ? | | | |

No. You have nothing to report in this part. Submit this form to the court with you other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what

Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in

Total claim

First Name Middle Name

Document

Page 21 of 55

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | , | Total claim |
|--------------------------|-----|---|-------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. 🛧 | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | |
| 1 | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| : | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. 🛨 | \$0.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$0.00 |

| F | II in this info | ormation to id | entify your case. | ed 02/17/16 | Entered | 02/17/16 of 55 | 14:25:28 | Desc Ma | in |
|--------|------------------------------|-------------------------|--|--|------------|-------------------|-----------------|----------------------------|------|
| De | ebtor 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | | 01 00 | | | |
| | ebtor 2 pouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| Uı | nited States Bar | nkruptcy Court for | the: NORTHERN D | STRICT OF ILLIN | ois | | | | |
| | ase number known) | | <u> </u> | · · · · · · · · · · · · · · · · · · · | | | _ | if this is an ed filing | |
| | ficial Form | | Contracts and | d Unexpired I | eases | | | | 12/1 |
| Be cor | as complete an | nd accurate as po | ossible. If two marrie is needed, copy the , write your name and | d people are filing tadditional page, fill | ogether, b | | - | | |
| 1. | Do you have a | any executory co | entracts or unexpired | leases? | | | | | |
| | المخبا | | e this form with the cou nation below even if the | | | , | • | | /B). |
| 2. | is for (for exa | • | r company with whor le lease, cell phone). ed leases. | • | | | | | of |
| | Person or | company with w | hom you have the co | intract or lease | State | vhat the contra | act or lease is | for | |

| Fill in this | information to ic | ientify your case: | | red 02/17/16 14:25: 23 of 55 | 28 Desc Ma | ıin |
|--------------------------|---|--------------------------|---|---|-------------------------------------|---------|
| Debtor 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | _ | | |
| Debtor 2 | The Marie | Marilla Mana | | | | |
| | ng) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for | the: NORTHERN D | ISTRICT OF ILLINOIS | _ | | |
| Case number (if known) | | | · · · · · · · · · · · · · · · · · · · | _ | heck if this is an mended filing | |
| | | | | | | |
| Official For | rm 106H | | | | | |
| Schedule | H: Your Code | btors | | | | 12/15 |
| 1. Do you ha ☑ No ☐ Yes | ive any codebtors? | (If you are filing a joi | nt case, do not list either sp | ouse as a codebtor.) | | |
| | | | | ory? (Community property s | | |
| | Go to line 3. | ,,, | | , | , | |
| ! | No | ner spouse, or legal ed | quivalent live with you at the | time? | | |
| | Yes | | | | | |
| person sh creditor o | own in line 2 again n <i>Schedule D</i> (Offic | as a codebtor only if | that person is a guarantor dule E/F (Official Form 106 | ebtor if your spouse is filing or cosigner. Make sure yo E/F), or Schedule G (Officia | u have listed the | |
| Column | 1: Your codebtor | | | Column 2: The creditor | to whom you owe th | ne debt |
| | | | | Check all schedules that | apply: | 1 1 |
| | | | | | | |

| F | Case 1 | ation to identify | your case: | 1 02/17/16 cument | Entered | 02/17 of 55 | 7/16 14:25 | :28 De | sc Ma | iin |
|------------------------|--|--|---|--|------------------------------|-------------------------|------------------------------------|------------------------------|--------------|-------------|
| | Debtor 1 | Vitangelo | 181111111 | L'Abbat | | | | | | |
| | | First Name | Middle Name | Last Name | 1 | 0 | Check if this is: | | | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | [| An amende | d filing | | |
| | United States Bankru | ntcy Court for the | NORTHERN | DISTRICT OF I | LLINOIS | . [| | ent showing p | • | |
| ļ | Case number | proy Court for the. | | | | _ | chapter 13 | income as of | f the follo | owing date: |
| | (if known) | | | | | | MM / DD / Y | MYY - | _ | |
| 0 | fficial Form 106 | 3I | | | | | | | | |
| | chedule I: You | _ | | | | | | | | 12/15 |
| res ind ab yo | e as complete and acc sponsible for supplyiclude information about your spouse. If rur name and case nu | ng correct information out your spouse. In ore space is need to the contract of the contract o | ation. If you are f you are separa ded, attach a se Answer every q | married and not ated and your sp parate sheet to t | filing jointl ouse is not | y, and yo filing wit | ur spouse is li h you, do not i | ving with yo nclude infor | u, mation | |
| 1. | Fill in your employ | | | | · | | | | | - L |
| 1. | information. | | | Debtor 1 | | | Debtor 2 | or non-filing | spouse | • |
| | If you have more the job, attach a separa | | yment status | ☐ Employed | | | □ Emp | loyed | | |
| | with information abo | | ymoni outuo | ✓ Not employ | yed | | | employed | | |
| | additional employer | s. Occup | ation | Disabled | | _ | <u> </u> | | | |
| | Include part-time, so or self-employed wo | | yer's name | | | | | | | |
| | 0 | | | | | | | | | |
| | Occupation may inc student or homema applies. | -1110-0 | yer's address | Number Street | | | Number S | treet | | |
| | арриос. | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | City | State | Zip Code | e City | | State | Zip Code |
| | | | | City | State | Zip Oode | . Oity | | Oldio 2 | Lip Code |
| | | How Id | ng employed th | ere? | · · | | _ | | | |
| F | Part 2: Give De | etails About Mo | nthly Income | 9 | | | | | | |
| | timate monthly incor | | ou file this form | . If you have not | hing to repo | rt for any l | line, write \$0 in | he space. Ir | nclude yo | our |
| lf y | ou or your non-filing s need more space, at | pouse have more t | nan one employe | er, combine the in | formation for | r all emplo | oyers for that pe | rson on the l | ines belo | ow. If |
| • | | · · · · · · · · · · · · · · · · · · · | | | For | Debtor 1 | | otor 2 or ng spouse | | |
| 2. | List monthly gross payroll deductions). would be. | wages, salary, ar If not paid monthly | d commissions , calculate what | (before all the monthly wage | 2. | \$0.0 | | | | : |
| 3. | Estimate and list m | nonthly overtime p | ay. | | 3. + | \$0.0 | 00 | | | |
| 4. | Calculate gross in | come. Add line 2 | · line 3. | | 4. | \$0.0 | 00. | | | |

| | Pirst Name windie Name Document | Page | 25 of 55 | | |
|-----|--|-----------------------|---------------------------------|---------------------------------------|----------------|
| | | F - | or Debtor 1 | For Debtor 2 or non-filing spous | <u>e</u> |
| | Copy line 4 here | 4. | \$0.00 | | |
| 5. | List all payroll deductions: | | | | |
| ٥. | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | · · · · · · · · · · · · · · · · · · · | h |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| | | 5d. | \$0.00 | | |
| | | | \$0.00 | | |
| | | 5e. | \$0.00 | | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | |
| | 5g. Union dues 5h. Other deductions. | 5g. | \$0.00 | | |
| | Specify: | 5h.+ | \$0.00 | | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | 6. | \$0.00 | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | |
| 8. | List all other income regularly received: 8a. Net income from rental property and from operating a | 8a. | *** | | |
| , | business, profession, or farm | oa. | \$0.00 | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | | |
| | 8e. Social Security | 8e. | \$2,300.00 | · · | |
| | 8f. Other government assistance that you regularly receive | 06. | \$2,300.00 | | |
| | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps | | | | |
| | (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | |
| | Specify: | 8f. | \$0.00 | | |
| | 8g. Pension or retirement income | - 8g. | \$0.00 | | |
| | 8h. Other monthly income. | | , | | |
| | Specify: Workmans Compensation | 8h. + | \$3,385.00 | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$5,685.00 | |] |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. | 10. | \$5,685.00 | + | = \$5,685.00 |
| 11. | State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives. | Schedule hold, you | J. ir dependents, you | ur roommates, and o | ther |
| | Do not include any amounts already included in lines 2-10 or amounts that | at are not | t available to pay | expenses listed in S | chedule J. |
| | Specify: | | | 11. | + \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. | | | | \$5,685.00 |
| | income. Write that amount on the Summary of Your Assets and Liabilities | s and Ce | ertain Statistical In | formation, | Combined |
| | if it applies. | | | | monthly income |
| 13. | Do you expect an increase or decrease within the year after you file t | this form | 1? | | · |
| | No. None. | | _ | | |
| | Yes. Explain: | | | | |
| | | | | | |
| | | - | | | |

Filed 1927 17/16 Entered 02/17/10 14 25 28 — Desc Main

| F | ill in this inform | nation to identi | ly your case ed C | 2/17/16 | Entered 02 | /17/16 1/ 55 ^{Check if thi} | | esc Main |
|-----|--|--|--|-------------------|--------------------|---|---------------------------------|-----------------|
| | Debtor 1 | Vitangelo First Name | Middle Name | L'Abb Last Nar | | An am | ended filing olement showing | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Nar | me | | er 13 expenses a ng date: | s of the |
| | | | NORTHERN DIS | | | <u> </u> | DD / YYYY | _ |
| | Case number | | NORTHERN DIO | 1101 01 | TELITOIS | MIM / L | ווווו / טכ | |
| | (if known) | | | | | | | |
| 01 | fficial Form 10 |)6 <u>J</u> | | | | | \ | |
| Sc | chedule J: Yo | our Expense | S | | | | | 12/15 |
| nai | rrect information. I me and case numb | f more space is ne | e. If two married peo eded, attach another wer every question. | | | | | |
| 1. | ls this a joint cas | se? | | | · · | | | |
| | ✓ No. Go to lin Yes. Does C No | ne 2. Debtor 2 live in a se | eparate household? e Official Form 106J-2 | , Expenses | for Separate House | ehold of Debto | r 2: , , , , | |
| 2. | Do you have dep | = | No | | Dependent's relat | ionship to | Dependent's | Does dependent |
| | Do not list Debtor Debtor 2. | 1 and | Yes. Fill out this info for each dependent | | Debtor 1 or Debto | | age | live with you? |
| | | | | | Son | <u>.</u> | 12 | □ No - ☑ Yes |
| | Do not state the d names. | ependents' | | | Son | | 14 | □ No |
| | <i>i</i> . | | | | | | | T ☑ Yes ☐ No |
| | | | | | | | _ | Yes |
| | | | | | | <u> </u> | _ | □ No □ Yes |
| | | | | | <u></u> | | | □ No |
| 3. | Do your expense expenses of peo yourself and you | ple other than | ✓ No ☐ Yes | | | | | Yes |
| | | | | | | | | |
| Est | timate your expens | ses as of your bank of a date after the | ng Monthly Expe | less you a | | | | |
| | | | h government assista n Schedule I: Your Ind | | | | Your expens | ses |
| 4. | | | enses for your reside any rent for the ground | | | | 4. | \$3,000.00 |
| | If not included in | line 4: | | | | | | |
| | 4a. Real estate to | axes | | | | | 4a | |
| | 4b. Property, hor | meowner's, or rente | 's insurance | | | | 4b | |
| | 4c. Home mainte | enance, repair, and | upkeep expenses | | | | 4c | * . |
| | 4d. Homeowner's | s association or cor | dominium dues | | | | 4d | |
| | | | 1 | | | | | 5 |

Debtor 1 Vitangelse 16-05074 Doc 1 Filed 492417/16 Entered 02/197119 14 25 28 Desc Main Doc 1 Page 27 of 55

Your expenses

| 5. | Additional mortgage payments for your residence, such as home equity loans | 5 | |
|-----|---|----------|--------------|
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a | \$350.00 |
| | 6b. Water, sewer, garbage collection | 6b | \$100.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and | 6c | \$200.00 |
| | cable services 6d. Other. Specify: | 6d. | |
| 7. | Food and housekeeping supplies | | \$600.00 |
| 8. | Childcare and children's education costs | 8. | \$800.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$100.00 |
| 10. | Personal care products and services | 10. | \$50.00 |
| 11. | Medical and dental expenses | 11. | \$40.00 |
| 12. | Transportation. Include gas, maintenance, bus or train | 12. | \$100.00 |
| 13. | fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, | 13. | \$20.00 |
| 13. | magazines, and books | _ | |
| 14. | Charitable contributions and religious donations | 14. | \$100.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | |
| | 15b. Health insurance | 15b. | \$100.00 |
| | 15c. Vehicle insurance | 15c. | \$100.00 |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16 | e e e |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | |
| | 17b. Car payments for Vehicle 2 | 17b | |
| | 17c. Other. Specify: | 17c | |
| | 17d. Other. Specify: | 17d | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18 | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| | 20a. Mortgages on other property | 20a | |
| | 20b. Real estate taxes | 20b | 34 Sec. 1945 |
| | 20c. Property, homeowner's, or renter's insurance | 20c | <u> </u> |
| | 20d. Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. Homeowner's association or condominium dues | 20e. | |
| 21. | Other. Specify: | 21. | |

| Debi | or 1 | Vitangelse 16-05074 Doc 1 Fileld 1929 17/16 Entered 02/1971 16 First Name Document Page 28 of 55 | 914:25:2 | 28 - De | sc Main — |
|------|--------------|---|----------|--------------------|------------|
| 22. | Calc | ulate your monthly expenses. | | | |
| | 22a. | Add lines 4 through 21. | 22a. | | \$5,660.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. | , | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c. | | \$5,660.00 |
| 23. | Calc | ulate your monthly net income. | | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | \$5,685.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b | | \$5,660.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | | \$25.00 |
| 24. | Do y | ou expect an increase or decrease in your expenses within the year after you file this form | ? | | |
| | | example, do you expect to finish paying for your car loan within the year or do you expect your monent to increase or decrease because of a modification to the terms of your mortgage? | ortgage | | |
| | \checkmark | No | | | |
| | | Yes. Explain here: | | | |
| | | | | | |
| | : | | | | |

| Fill | in this inf | ormation to i | dentify your cas | | | 2/17/16 14:25:28 | Desc Main |
|-------|---------------------------|---|--|--|--------------------|---|------------------------------------|
| Deb | tor 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | Page 29 of | 55 | |
| | tor 2 ouse, if filing) | First Name | Middle Name | Last Name | | | |
| | | | r the: NORTHERN | DISTRICT OF ILLI | NOIS | | |
| | e number | | | | | ☐ Check | if this is an |
| (if k | nown) | | | | | | ded filing |
| Offi | cial Form | 106Sum | | | | | |
| | | | ets and Liabil | ities and Cert | ain Statisti | cal Information | 12/15 |
| corre | ct informatio | on. Fill out all of | your schedules firs nal forms, you must | t; then complete the | information on | are equally responsible this form. If you are fili the box at the top of this | ng amended |
| | | | | • | | | Your assets Value of what you own |
| | | 3: Property (Officia | • | | | | |
| • | 1a. Copy line | e 55, Total real es | tate, from Schedule | A/B | | | \$210,000.00 |
| | 1b. Copy line | e 62, Total persor | nal property, from Sch | nedule A/B | | , | \$4,600.00 |
| | | - 00 T (1 d 1 | · | A/D | : | | \$214,600.00 |
| | ic. Copy line | e 63, Total of all p | roperty on Schedule | A/B | | | |
| Pai | rt 2: Su | mmarize You | r Liabilities | | | | · . |
| | | | · . | | | | Your liabilities Amount you owe |
| | | | | y <i>Property</i> (Official F of claim, at the botton | | e of Part 1 of Schedule D. | \$362,000.00 |
| | | | | ms (Official Form 106 cured claims) from lir | • | э E/F | \$0.00 |
| ; | 3b. Copy the | e total claims from | ı Part 2 (nonpriority u | nsecured claims) from | m line 6j of Scheo | dule E/F | +\$0.00 |
| | | | | | | Your total liabilities | \$362,000.00 |
| Pai | rt 3: Su | mmarize You | r Income and Ex | penses | | | |
| | | our Income (Office mbined monthly in | | f Schedule I | | | \$5,685.00 |
| 5. 3 | Schedule J: Y | , , | Official Form 106J) | | | | \$5,660.00 |

| Det | otor 1 | Vitangelo L'Abbate Case num Filicola Se 16-050 Middle NEWOC 1 Filisol (2/2/17/16 Entered 02/1 Document Page 30 of 55 | nber (if known) 17/16 14:25:28 | Desc Main |
|-----|--------|---|-----------------------------------|----------------------|
| Р | art 4 | | | |
| 6. | Are | you filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | | No. You have nothing to report on this part of the form. Check this box and submit this fives | form to the court with yo | our other schedules. |
| 7. | Wha | at kind of debt do you have? | | |
| | ☑ | Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. | , , | • |
| | | Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules. | of the form. Check this | s box and submit |
| В. | | m the Statement of Your Current Monthly Income: Copy your total current monthly incoming Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | ome from | \$5,700.00 |
| 9. | Сор | by the following special categories of claims from Part 4, line 6 of Schedule E/F: | | |
| | | | Total claim | |
| | From | m Part 4 on Schedule E/F, copy the following: | | |
| | 9a. | Domestic support obligations. (Copy line 6a.) | \$0.0 | <u>)0</u> |
| | 9b. | Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.0 | 00 |
| | 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.0 | 00 |
| | 9d. | Student loans. (Copy line 6f.) | \$0.0 | 00 |
| | 9e. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.0 | 00 |
| | 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.0 | 00 |

9g. Total. Add lines 9a through 9f.

\$0.00

| Fill in this im | ormation to ide | ntify your case: | ed 02/17/16 Ente | red 02/17/16 14:25:28 | Desc Main | | | | |
|--|---|-----------------------|------------------------------|--|---------------------------|--|--|--|--|
| Debtor 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | - | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | | | | | |
| United States Bar | nkruptcy Court for th | ne: NORTHERN Ó | ISTRICT OF ILLINOIS | _ . | | | | | |
| Case number (if known) | | | | Check i | f this is an ed filing | | | | |
| Official Form | 106Dec | | | | | | | | |
| Declaration | About an Inc | dividual Debt | or's Schedules | | 12/15 | | | | |
| concealing proper \$250,000, or impri | f two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | | |
| | n Below or agree to pay son | neone who is NOT | an attorney to help you fill | out bankruptcy forms? | | | | | |
| ☑ No | | | | | | | | | |
| Yes. Na | ame of person | | <u> </u> | Attach Bankruptcy Petit Declaration, and Signatu | | | | | |
| | | | | | | | | | |
| Under penalty | | are that I have read | the summary and schedul | es filed with this declaration and | that they are | | | | |
| X V to | wys 1 d | Albah | X Signature of Debtor 2 | · · · · · · · · · · · · · · · · · · · | | | | | |
| Date MM | / DD / YYYY | | DateMM / DD / YYY | <u>Y</u> | | | | | |
| | | | | • | | | | | |

| F | ill in this Info | ormation to ider | itify your c | ase ed 02/17/16 | | | 14:25:28 | Desc Main |
|------------|-------------------------------------|---|-------------------------------|--|-------------------|--------------|------------------|-------------------------------|
| De | ebtor 1 | Vitangelo First Name | Middle Name | L'Abbate Last Name | Page 32 of | 55 | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| Ò | | | | | NOIS | | | |
| | | ikrupicy Court for the | . NORTHER | RN DISTRICT OF ILLI | NOIS | | | |
| | ase number known) | | | | - : | | Check if amended | this is an I filing |
| <u> </u> | | 407 | | | | | | |
| | ficial Form | | | | | | | |
| St | atement o | f Financial At | tairs for | Individuals Fili | ng for Bank | ruptcy | | 12/15 |
| cor you | rect information or name and cas | n. If more space is se number (if know | needed, attac n). Answer e | narried people are filing to a separate sheet to be very question. | this form. On the | e top of any | • | |
| 1. | What is your | current marital state | us? | | | | - | |
| | Married | | | | | | | |
| | ✓ Not marrie | ed | | | | | | |
| 2. | ☑ No | | | ere other than where y | | | | |
| | _ | all of the places you | lived in the las | st 3 years. Do not includ | | now. | | |
| | Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | J. | | Dates Debtor 2 lived there |
| 3. | (Community pr | | | a spouse or legal equiv de Arizona, California, Id | | | | |
| | ✓ No Yes. Mak | e sure you fill out <i>Sc</i> | hedule H. You | ur Codebtors (Official Fo | rm 106H). | | | |
| | | | | | | | | |

| Р | art 2: Explain the Sources of Y | Document ′our Income | Page 33 of 5 | .5 · | | | | |
|----|--|--------------------------------------|--|--------------------------------------|--|--|--|--|
| 4. | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | | |
| | ✓ No✓ Yes. Fill in the details. | | | | | | | |
| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | |
| | List each source and the gross income fro | om each source separately. | Do not include income | that you listed in line 4. | | | | |
| | ☐ No ☑ Yes. Fill in the details. | | | | | | | |
| | | Debtor 1 - House Control | Property of the second | Debtor 2 | 100 100 100 100 100 100 100 100 100 100 | | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | | | |
| | m January 1 of the current year until date you filed for bankruptcy: | Social Security Disabi | \$2,300.00 \$3,500.00 | | | | | |
| | the last calendar year: nuary 1 to December 31, 2015 | Social Security/ Work | mar \$56,000.00 | | | | | |
| | the calendar year before that: nuary 1 to December 31, _2014) | Employment Income | \$36,000.00 | | | | | |
| | YYYY | | | | | | | |

Debtor 1

| Del | otor 1 | Vitangelo Selesse 16-0507 Mudle seles 1 | File No. 2/1 | 7/16 En tered | ase 2717716 kg | 4:25: 28 Desc Main | |
|-----|--|--|-------------------|--------------------------|------------------------|---|--|
| _ | | 11.40 (1) D | Docume | | | | |
| ٢ | art 3: | List Certain Payments You M | lade Before | ou Filed for Bai | nkruptcy | | |
| 6. | Are eithe | er Debtor 1's or Debtor 2's debts prin | narily consume | debts? | | | |
| | □ No. | Neither Debtor 1 nor Debtor 2 has "incurred by an individual primarily fo | | | | d in 11 U.S.C. § 101(8) as | |
| | | During the 90 days before you filed for | or bankruptcy, di | d you pay any credito | or a total of \$6,225* | or more? | |
| | | ☐ No. Go to line 7. | | | | | |
| | | Yes. List below each creditor to vertotal amount you paid that conclude support and alimony. | reditor. Do not i | nclude payments for | domestic support o | bligations, such as | |
| | | * Subject to adjustment on 4/01/16 a | nd every 3 years | after that for cases f | iled on or after the | date of adjustment. | |
| | Yes. | Debtor 1 or Debtor 2 or both have | primarily consu | mer debts. | | | |
| | | During the 90 days before you filed for | or bankruptcy, di | d you pay any credito | or a total of \$600 or | more? | |
| | | No. Go to line 7. | | | | | |
| | | Yes. List below each creditor to vacceditor. Do not include payment | yments for dome | stic support obligation | ns, such as child su | | |
| | | | Dates of payment | Total amount paid | Amount you stil owe | Was this payment for | |
| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. No Yes. List all payments to an insider. | | | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | |
| 8. | Within 1 benefite | year before you filed for bankruptcy d an insider? | , did you make a | any payments or tra | nsfer any property | on account of a debt that | |
| | Include p | payments on debts guaranteed or cosig | ned by an inside | | | | |
| | ✓ No ☐ Yes. | List all payments that benefited an ins | sider. | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name | |
| | | | | | | | |

| Debtor 1 | | Vitangelo Fils Asse 16-0507 Middle Nange 1 Fils (1972/17/16 Entered 02/17/16 14:25:28 Desc Main Document Page 35 of 55 |
|------------|---------------|--|
| Pa | art 4: | Identify Legal Actions, Repossessions, and Foreclosures |
| 9. | List all | 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody ations, and contract disputes. |
| | ✓ No | s. Fill in the details. |
| | | Nature of the case Court or agency Status of the case |
| 10. | seized, | 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, or levied? all that apply and fill in the details below. |
| | | . Go to line 11. s. Fill in the information below. |
| 11. | | 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any ts from your accounts or refuse to make a payment because you owed a debt? |
| | ✓ No ☐ Yes | s. Fill in the details. |
| 12. | | 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of rs, a court-appointed receiver, a custodian, or another official? |
| | ✓ No ☐ Yes | |
| Pa | art 5: | List Certain Gifts and Contributions |
| 13. | ₩ No | 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? s. Fill in the details for each gift. |
| 14. | | 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 charity? |
| | ✓ No ☐ Yes | s. Fill in the details for each gift or contribution. |
| Pa | art 6: | List Certain Losses |
| 15. | | 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, isaster, or gambling? |
| | ☑ No ☐ Yes | o de la composiçõe de la c S. Fill in the details. Com la composiçõe de la composiçõe de la composiçõe de la composiçõe de la composiçõe d La composiçõe de la compo |

| | tor 1 | Vitangelo Files 16-0507 Middle Page 1 Files 12/17/16 Entered 02/17/16 14:25:28 Desc Ma | in |
|--------|---------------|---|-------------|
| 21. | | Document Page 36 of 55 unow have, or did you have within 1 year before you filed for bankfuptcy, any safe deposit box or other depository curities, cash, or other valuables? | |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 22. | - | ou stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | |
| | ✓ No | s. Fill in the details. | |
| P | art 9: | Identify Property You Hold or Control for Someone Else | |
| 23. | or hold | u hold or control any property that someone else owns? Include any property you borrowed from, are storing for, d in trust for someone. | |
| | 1 | ss. Fill in the details. | |
| Р | art 10: | Give Details About Environmental Information | |
| For | the pur | pose of Part 10, the following definitions apply: | |
| -, 1:1 | hazardo | mental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of ous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, or groundwater or regulations controlling the cleanup of these substances, wastes, or material. | 1. # 1. * · |
| | | ans any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites. | |
| | | ous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic ace, hazardous material, pollutant, contaminant, or similar item. | |
| Rep | ort all n | notices, releases, and proceedings that you know about, regardless of when they occurred. | |
| 24. | Has an | ny governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental | |
| | ✓ No | es. Fill in the details. | |
| 25. | | you notified any governmental unit of any release of hazardous material? | |
| _0. | ☑ No | | |
| 26. | Have y | | |
| | ☑ No | es. Fill in the details. | |
| | П .е | | |
| | | | |
| | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Ligudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| + | \$75 | filing fee administrative fee trustee surcharge |
|---|-------|---|
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

B2030 (Form 2000) (12019) 5074

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Desc Main

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION (CHICAGO)**

In re Vitangelo L'Abbate Case No. Chapter 13 DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept..... Prior to the filing of this statement I have received..... Balance Due..... 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of compensation to be paid to me is: **▼** Debtor ☐ Other (specify) 4. 🔽 I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

| B2030 (Form 2020) @12/6505074 | Doc 1 | Filed 02/17/16 Document | Entered 02/17/16 14:25:28 Page 40 of 55 | Desc Main |
|---------------------------------------|------------|----------------------------|--|-----------|
| 6. By agreement with the debtor(s), t | he above-d | isclosed fee does not | include the following services: | |

| CE | DTI | EI | $\sim \Delta$ | TIC | M |
|----|-----|----|---------------|-----|---|

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Joseph C. Michelotti Michelotti & Associates 2625 Butterfield Rd. Suite 138S Oak Brook, IL 60523

Phone: (630) 928-0100

erfield Rd.

Bar No. 6185760

Vitangelo L'Abbata

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.
- C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES
- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by

the debtor.

- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.

2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3.Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000
- 2. In addition, the debtor will pay the filing fee required in the case of \$\(3/\ell)^{\rightarrow}\)
- 3. Before signing this agreement, the attorney has received, \$ $2/100^{-0.02}$ toward the flat fee, leaving a balance due of \$ $3/900^{-0.02}$; and \$ for expenses, leaving a balance due for the filing fee of \$ 0

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Attorney for the

Date: 2 - 17 - 16

Signed:

Do not sign this agreement if the amounts are blank.

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Wells Fargo Home Mortgage POB 10335 Des Moines, IA 50306 Case 16-05074 Doc 1 Pred 102/17/16 Entered 02/17/16 14:25:28 EADES (CHICAGO)

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NORTHERNUDISTRICTFOR #L49NOIS5 EASTERN DIVISION (CHICAGO)

IN RE: Vitangelo L'Abbate

CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

| The above named Debtor hereby verifies that the knowledge. | e attached list of creditors is true and correct to the best of his/her |
|--|---|
| Date | Signature Vitangelo L'Abbate |

Signature _

Joseph C. Michelotti, Bar No. 6185760 Michelotti & Associates 2625 Butterfield Rd. Suite 138S

Oak Brook, IL 60523 (630) 928-0100

Attorney for the Petitioner

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UNITED STATES BANKRUPTCY COURT FOR THE

NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

| n re: /itangelo L'Abbate | | xxx-xx-0867 | |
|--|------------------------|--|--------------------------------------|
| Debtor(s) | SSN: | | |
| | Numbered List | ing of Creditors | |
| Address: | | | |
| 7917 Wellington Ave. Elmwood Park, IL 60707 | Chapter: | 13 | |
| | | | |
| Creditor name and mailing add | ress | Category of claim | Amount of claim |
| 1. Wells Fargo Home Mortgage POB 10335 Des Moines, IA 50306 | | Secured Claim | \$362,000.00 |
| (The penalty for making a false statement of 18 U.S.C. secs. 152 and 3571.) | or concealing property | is a fine of up to \$500,000 or impr | risonment for up to 5 years or both. |
| 16 U.S.C. Secs. 152 and 557 1.) | DECLA | RATION | |
| I, _Vitangelo L'Abbate | DLOEF | a carron | |
| named as debtor in this case, declare under consisting of1 sheets (including the Debtor: | | at I have read the foregoing Num t it is true and correct to the best of | |
| | | | |

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NORTH DRULDISM RICT POR &L 5.1 NO 155 **EASTERN DIVISION (CHICAGO)**

IN RE: Vitangelo L'Abbate

CASE NO

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: State

| lo. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount |
|------------|--|-------------------------|-----------------------|--------------|------------------------|--------------|
| | Real property | \$210,000.00 | \$362,000.00 | \$0.00 | \$0.00 | \$0.00 |
| i. | Motor vehicles (cars, etc.) | \$3,000.00 | \$0.00 | \$3,000.00 | \$3,000.00 | \$0.00 |
| | Water/Aircraft, Motor Homes, Rec. veh. and access. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| i. | Household goods and furnishings | \$550.00 | \$0.00 | \$550.00 | \$550.00 | \$0.00 |
| ·. | Electronics | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | Collectibles of value | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| . | Equipment for sports and hobbies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 0. | Firearms | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 1. | Clothes | \$250.00 | \$0.00 | \$250.00 | \$0.00 | \$250.00 |
| 2. | Jewelry | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3. | Non-farm animals | \$0.00 | , \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 1. | Unlisted pers. and household items- incl. health aids | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| ô. | Cash | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 7. | Deposits of money | \$800.00 | \$0.00 | \$800.00 | \$800.00 | \$0.0 |
| 3. | Bonds, mutual funds or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| €. | Non-pub. traded stock and int. in businesses | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
|). | Govt. and corp. bonds and other instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| ١. | Retirement or pension accounts | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 2. | Security deposits and prepayments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 3. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 1 . | Interests in an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| ō. | Trusts, equit. or future int. (not in line 1) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 6. | Patents, copyrights, and other intellectual prop. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 7. | Licenses, franchises, other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |
| 3. | Tax refunds owed to you | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.0 |

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ORTHEROLDISTRICT CALGOLS AND IS:

IN RE: Vitangelo L'Abbate

CASE NO

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: State

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-------------|---|-------------------------|-----------------------|--------------|------------------------|----------------------------|
| 29. | Family support | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 30. | Other amounts someone owes you | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 31. | Interests in insurance policies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 32. | Any int. in prop. due you from someone who has died | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 33. | Claims vs. third parties, even if no demand | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 34. | Other contin. and unliq. claims of every nature | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 35. | Any financial assets you did not already list | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 38. | Accounts rec. or commissions you already earned | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 39. | Office equipment, fumishings, and supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 40. | Mach., fixt., equip., bus. suppl., tools of trade | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 41. | Inventory | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 42. | Interests in partnerships or joint ventures | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 43. | Customer and mailing lists, or other compilations | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 44. | Any business-related property not already listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 47. | Farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 1 8. | Cropseither growing or harvested | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 49. | Farm/fishing equip., impl., mach., fixt., tools | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 50. | Farm and fishing supplies, chemicals, and feed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 51. | Farm/commercial fishing-related prop. not listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 53. | Any other property of any kind not already listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | TOTALS: | \$214,600.00 | \$362,000.00 | \$4,600.00 | \$4,350.00 | \$250.00 |

Case 16-05074

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NORTHERNUDISMRICTRODEL53ND155 EASTERN DIVISION (CHICAGO)

IN RE: Vitangelo L'Abbate

CASE NO

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

| Property Description | | . N | larket Value | Li | en | Equity |
|--|--------------|--------------|--------------|--------|---------|------------|
| Real Property (None) | | | | - | | |
| <u>Personal Property</u> (None) | | | | | | |
| TOTALS: | . | | \$0.00 | \$0 | .00 | \$0.00 |
| | | | | | | |
| Non-Exempt Property by Item | | 2 49 | | | | |
| Non-Exempt Property by Item | | Market Value | Lien | Equity | Non-Exe | mpt Amount |
| Non-Exempt Property by Item The following property, or a portion the | | | Lien | Equity | Non-Exe | mpt Amount |

| TOTALS: | 4233.03 | 4 4.00 | , , , , , , , , , , , , , , , , , , , | - |
|-------------------|----------|---------------|---------------------------------------|----------|
| TOTALC | \$250.00 | \$0.00 | \$250.00 | \$250.00 |
| Casual Clothing | \$250.00 | | \$250.00 | \$250.00 |
| Personal Property | | | | |
| | | | | |
| (None) | | | | |

| Summary | |
|--|--------------|
| A. Gross Property Value (not including surrendered property) | \$214,600.00 |
| B. Gross Property Value of Surrendered Property | \$0.00 |
| C. Total Gross Property Value (A+B) | \$214,600.00 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$362,000.00 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$0.00 |
| F. Total Gross Encumbrances (D+E) | \$362,000.00 |
| G. Total Equity (not including surrendered property) / (A-D) | \$4,600.00 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$4,600.00 |
| J. Total Exemptions Claimed | \$4,350.00 |
| K. Total Non-Exempt Property Remaining (G-J) | \$250.00 |

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ells Fargo Home Mortgage OB 10335 es Moines, IA 50306

Case 16-05074 **DUNITED ISTRATION DISTRICT POPOLISINO IS**NORTHERN DISTRICT POPOLISINO IS

EASTERN DIVISION (CHICAGO)

IN RE: Vitangelo L'Abbate

CASE NO.

CHAPTER 13

CERTIFICATE OF SERVICE

| I, the undersigned, hereby certify that on February 17, 2016, a was served on each party in interest listed below, by placing e prepaid in compliance with Local Rules. | |
|---|---|
| Date: | 15/ Juseph C. Michelotti |
| | Joseph C. Michelotti Attorney for the Debtor(s) |

Vitangelo L'Abbate 7917 Wellington Ave. Elmwood Park, IL 60707

Wells Fargo Home Mortgage POB 10335 Des Moines, IA 50306